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Bib Data Sheet

CONFIRMATION NO. 5619

<b>SERIAL NUMBER</b> 09/957,054	<b>FILING DATE</b> 09/20/2001 <b>RULE</b>	<b>CLASS</b> 360	<b>GROUP ART UNIT</b> 2652	<b>ATTORNEY DOCKET NO.</b> P00-3286	
<b>APPLICANTS</b> Steven E. Fairchild, Houston, TX; <b>** CONTINUING DATA *****</b> NONE rev <b>** FOREIGN APPLICATIONS *****</b> NONE rev <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 10/16/2001 rev					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input type="checkbox"/> no		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 31	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 25235					
<b>TITLE</b> System and method for performing write operations in a disk drive using a write stack drive					
<b>FILING FEE RECEIVED</b> 1278	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 5619

<b>SERIAL NUMBER</b> 09/957,054	<b>FILING DATE</b> 09/20/2001 <b>RULE</b>	<b>CLASS</b> 360	<b>GROUP ART UNIT</b> 2651	<b>ATTORNEY DOCKET NO.</b> P00-3286
<b>APPLICANTS</b> Steven E. Fairchild, Houston, TX; <b>** CONTINUING DATA *****</b> NONE Rev <b>** FOREIGN APPLICATIONS *****</b> NONE Rev <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 10/16/2001 Rev				
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				<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 022879				
<b>TITLE</b> System and method for performing write operations in a disk drive using a write stack drive				
<b>FILING FEE RECEIVED</b> 1278	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	